

MaineCare Services

An Office of the Department of Health and Human Services

Department of Health and Human Services MaineCare Services # 11 State House Station Augusta, Maine 04333-0011 Tel: (207) 287-2674; Fax: (207) 287-2675

TTY: 1-800-606-0215

DATE: January 31, 2011

TO: Interested Parties

FROM: Russell J. Begin, Acting Director, MaineCare Services

SUBJECT: Proposed Rule: Chapter 101, MaineCare Benefits Manual, Section 65, Chapter III, Behavioral

Health Services

This letter gives notice of a proposed rule: Chapter 101, MaineCare Benefits Manual, Section 65, Chapter III, Behavioral Health Services. The Department is proposing to add a code modifier "HA" to Children's Assertive Community Treatment Services (ACT) to distinguish this treatment, for billing purposes, from Adult ACT found in Section 17, Community Support Services. Additionally, collateral contact rates were reduced in error by 10% effective July 01, 2010 and instead should have been reduced by 2%. The Department proposes to adopt the corrected rate retroactively to July 1, 2010. Lastly, group ratio procedure codes are being added to Children's Behavioral Health Day Treatment to allow for more accurate reimbursement. These new codes do not change the reimbursement rates for these services. The Department proposes to adopt this change retroactively to September 01, 2010.

Rules and related rulemaking documents may be reviewed at and printed from the MaineCare Services website at or, http://www.maine.gov/dhhs/oms/rules/provider_rules_policies.html or a fee, interested parties may request a paper copy of rules by calling 207-287-9368. For those who are deaf or hard of hearing and have a TTY machine, the TTY number is 1-800-606-0215.

A concise summary of the proposed rule is provided in the Notice of Agency Rule-making Proposal. This notice also provides information regarding the rule-making process. Please address all comments to the agency contact person identified in the Notice of Agency Rule-making Proposal.

Notice of Agency Rule-making Proposal

AGENCY: Department of Health and Human Services, MaineCare Services

RULE TITLE OR SUBJECT: Chapter 101, MaineCare Benefits Manual, Section 65, Chapter III,

Behavioral Health Services

PROPOSED RULE NUMBER:

CONCISE SUMMARY: The Department is proposing to add a code modifier "HA" to Children's Assertive Community Treatment Services (ACT) to distinguish this treatment, for billing purposes, from Adult ACT found in Section 17, Community Support Services. The Department proposes to adopt the corrected rate retroactively to July 1, 2010. Additionally, collateral contact rates were reduced in error by 10% effective July 01, 2010 and instead should have been reduced by 2%. The Department proposes to adopt the corrected rates retroactively to July 01, 2010. Lastly, group ratio procedure codes are being added to Children's Behavioral Health Day Treatment to allow for more accurate reimbursement. These new codes do not change the reimbursement rates for these services. The Department proposes to adopt this change retroactively to September 01, 2010.

SEE http://www.maine.gov/dhhs/oms/rules/provider_rules_policies.html for rules and related rulemaking documents.

THIS RULE WILL __ WILL NOT _X__ HAVE A FISCAL IMPACT ON MUNICIPALITIES.

STATUTORY AUTHORITY: 22 M.R.S.A., §§ 42, 3173

PUBLIC HEARING:

Date: March 1, 2011 3:00 PM

Location: Conference Room # 1A & 1B Department of Health and Human Services

MaineCare Services 442 Civic Center Drive

Augusta, ME

The Department requests that any interested party requiring special arrangements to attend the hearing contact the agency person listed above before February 18, 2011.

DEADLINE FOR COMMENTS: Comments must be received by midnight on Friday, March 11, 2011.

AGENCY CONTACT PERSON: Ginger Roberts-Scott, Comprehensive Health Planner

AGENCY NAME: MaineCare Services
ADDRESS: 442 Civic Center Drive
11 State House Station
Augusta, Maine 04333-0011

Augusta, Walle 04555-0011

TELEPHONE: 207-287-9365 FAX: (207) 287-9369

TTY: 1-800-606-0215 or 207-287-1828 (Deaf or Hard of Hearing)

BEHAVIORAL HEALTH SERVICES

SECTION 65

ESTABLISHED 8/1/08 LAST UPDATED 7/1/10

Procedure Code	Modifier	Modifier	Unit	Service Description	Maximum Allowance per unit	PA/UR
H2011			¼ hour	Crisis Resolution	By Report	N
H0018			Per Diem	Crisis Residential	By Report	Y
S9482			½ hour	Crisis Residential- in home	By Report	N
				Outpatient Services-Comprehensive Assessment		
H2000			1/4 hour	Psychologist-Independent	\$22.00	Y
H2000			1/4 hour	Mental Health Agency	\$21.00	Y
H2000	HH		1/4 hour	Mental Health Agency - Co-occurring	\$21.00	Y
H2000			¼ hour	Mental Health Agency – Deaf & Home Based Treatment for adults	\$30.75	Y
H2000			½ hour	Substance Abuse Agency	\$21.00	Y
H2000			1/4 hour	Substance Abuse Agency - Non Master's Level LADC	\$20.00	Y
H2000			1/4 hour	Substance Abuse Agency - CADC	\$14.50	Y
H2000			¼ hour	Independent LCSW, LCPC, LMFT - Non Agency	\$13.75	Y
				Outpatient Therapy-Individual/Family		
H0004			1/4 hour	Psychologist-Independent	\$22.00	Y
H0004			1/4 hour	Mental Health Agency-	\$21.00	Y
H0004	HH		1/4 hour	Mental Health Agency- Co-occurring	\$21.00	Y
H0004			¼ hour	Mental Health Agency – Deaf & Home Based Treatment for adults	\$30.75	Y
H0004			¼ hour	Substance Abuse Agency	\$21.00	Y
H0004			¹ / ₄ hour	Substance Abuse Agency - Non Master's Level LADC	\$20.00	Y

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H0004			¼ hour	Substance Abuse Agency - CADC	\$14.50	Y
H0004			¼ hour	Independent LCSW, LCPC, LMFT - Non Agency	\$13.75	Y
				Outpatient Therapy-Group		
H0004	HQ		1/4 hour	Psychologist-Independent	\$5.50	Y
H0004	HQ		¼ hour	Mental Health Agency	\$5.25	Y
H0004	HQ	НН	1/4 hour	Mental Health Agency – Co-occurring	\$5.25	Y
H0004	HQ		1/4 hour	Substance Abuse Agency	\$9.00	Y
H0004	HQ		¼ hour	Substance Abuse Agency - Non Master's Level LADC	\$8.50	Y
H0004	HQ		¼ hour	Substance Abuse Agency - CADC	\$7.00	Y
H0004	HQ		¼ hour	Independent LCSW, LCPC, LMFT - Non Agency	\$3.44	Y
H0025			Monthly	Family Psychoeducation Treatment Program Services- Children's	\$73.83	Y
H2027			¼ hour	Family Psychoeducation Treatment Program Services- Adult's	\$9.45	Y
110017			D		¢100.00	N.T
H0015			Per Diem	Intensive Outpatient Program	\$100.00	N
H2010			¼ hour	Medication Management Services	By Report	Y
H2010	НА		¼ hour	Medication Management Services-Children's	By Report	Y
96116			1 hour	Neurobehavioral Status exam-Psychologist or Physician (includes face-to-face with the member and report preparation)	\$79.20	N
96116			1 hour	School-Neurobehavioral Status exam-Psychologist or Physician (includes face-to-face with the member and report preparation)	\$79.20	N

1. HH-Co-occurring, HQ-Group

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LAST UPDATED 7/1/10

Procedure Code	Modifier	Modifier	Unit	Service Description	Maximum Allowance per unit	PA/UR
96101			1 hour	Psychological testing -Psychologist or Physician	\$79.20	N
96101			1 hour	School-Psychological testing -Psychologist or Physician	\$79.20	N
96102			1 hour	Psychological testing- Psychological Examiner face-to-face	\$50.22	N
96102			1 hour	School-Psychological testing- Psychological Examiner face- to-face	\$50.22	N
H0040	<u>HA</u>		Per diem	Children's Assertive Community Treatment (ACT)	By Report	Y
				Children's Home and Community Based Treatment		
H2021	HN		¹ / ₄ hour	Comprehensive Community Support Services-Bachelor's level	\$14.36	Y
H2021	НО		¼ hour	Comprehensive Community Support Services-Master's level	\$23.28	Y
H2021	HY		½ hour	Comprehensive Community Support Services-Functional Family Therapy- Corrections Contract only	\$39.04	Y
H2021	HU		¼ hour	Comprehensive Community Support Services-Master's level-OCFS	\$23.28	Y
H2021	HU	U1	¼ hour	Comprehensive Community Support Services-Bachelor's level-OCFS	\$14.36	Y
H2033			¼ hour	Multi-systemic Therapy for juveniles (MST)	\$31.07	Y
H2033	НК		1/4 hour	Multi-systemic Therapy for juveniles –Problem Sexualized Behavior (MST-PSB)	\$38.73	Y

1. HH-Co-occurring, HQ-Group

BEHAVIORAL HEALTH SERVICES

SECTION 65
ESTABLISHED 8/1/08
LAST UPDATED 7/1/10

Procedure Code	Modifier	Modifier	Unit	Service Description	Maximum Allowance per unit	PA/UR
				Collateral Services for Children's Home and Community Based Treatment		
G9007	HN		¼ hour	Collateral Services - Bachelor's level	\$ 13.19 <u>14.36</u>	Y
G9007	НО		¼ hour	Collateral Services - Master's level	\$ 21.38 <u>23.28</u>	Y
G9007	HT		¼ hour	Collateral Services - Master's level (MST)	\$ 28.53 <u>31.07</u>	Y
G9007	HK		½ hour	Collateral Services - Master's level (MST-PSB)	\$ 35.57 <u>38.73</u>	Y
G9007	HY		¼ hour	Collateral Services - Functional Family Therapy- Corrections Contract only	\$ 35.86 <u>39.04</u>	Y
G9007	HU		¼ hour	Collateral Services - OCFS	\$ 21.38 <u>23.28</u>	Y
H0020			Weekly	Opioid Treatment	\$72.00	N
H2012	HN		Hourly	Children's Behavioral Health Day Treatment-BHP Level	\$58. 60	¥
H2012	HN		Hourly	School-Children's Behavioral Health Day Treatment-BHP Level	\$58.60	Y
H2012	HN	<u>UN</u>	<u>Hourly</u>	School-Children's Behavioral Health Day Treatment-BHP Level- UN two patients served	\$29.30	<u>Y</u>

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Procedure	Modifier	<u>Modifier</u>	<u>Unit</u>	Service Description	Maximum Allowance	PA/UR
<u>Code</u>					<u>per unit</u>	
<u>H2012</u>	<u>HN</u>	<u>UP</u>	Hourly	School-Children's Behavioral Health Day Treatment-BHP Level UP three patients served	\$19.53	<u>Y</u>
<u>H2012</u>	<u>HN</u>	<u>UQ</u>	Hourly	School-Children's Behavioral Health Day Treatment- BHP Level- UQ four patients served	<u>\$14.65</u>	<u>Y</u>
H2012	HO		Hourly	Children's Behavioral Health Day Treatment-Master's Level	\$95.00	¥
H2012	НО		Hourly	School-Children's Behavioral Health Day Treatment- Master's Level	\$95.00	Y
<u>H2012</u>	HO	<u>UN</u>	Hourly	School-Children's Behavioral Health Day Treatment- Master's Level UN two patients served	<u>\$47.50</u>	<u>Y</u>
<u>H2012</u>	HO	<u>UP</u>	Hourly	School-Children's Behavioral Health Day Treatment- Master's Level UP three patients served	<u>\$31.67</u>	<u>Y</u>
<u>H2012</u>	<u>HO</u>	<u>UQ</u>	Hourly	School-Children's Behavioral Health Day Treatment- Master's Level UQ four patients served	<u>\$23.75</u>	Y

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